

Table of Contents

100 - INTRODUCTION TO THE CARE COORDINATION MANUAL

100 - INTRODUCTION TO THE CARE COORDINATION MANUAL	100-2
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The Care Coordination Manual contains a table of contents, table of charts, chapters, sections, appendices, and a glossary. After Program Introduction and Administrative Organization, the order of the chapters follows the flow of a client entering the Community Care Services Program from referral through ongoing case activities.

Chapters and sections are numbered for easy referencing. Each chapter contains a partial table of contents that list sections within the chapter. Each section gives information about a particular topic. For example, Section 910 contains information on Address Changes. The appendices are generally arranged alphabetically by topic. For example, Appendix 100, Forms and Instructions, precedes Appendix 300, Job Descriptions. Acronyms and abbreviations are alphabetically listed as are terms in the Glossary.

The manual is written as if the care coordinator is the reader. The structure of each chapter and section is consistent. Additionally, the format for each topic is consistent: Policy Statement, Policy Basics, Procedures, and References. **Policy Statement** is a brief definition or statement of the policy which governs the topic. **Policy Basics** gives additional policy information. The **Procedures** portion provides instructions to care coordinators for implementing policies. Unless otherwise indicated, a registered nurse (RN) or social services worker may conduct out the actions described in Procedures. The manual specifies when an RN must complete the activity. The **Reference** statement tells the reader where to find related information. References are used to avoid duplicating text contained in other sections and chapters of The Care Coordination Manual and in the provider manuals.

Subheadings accompany lengthy narratives for easy reference. Vertical lists have bullets when actions occur in no prescribed order. If actions occur in a specific sequence, lists are numbered to identify the sequence. Horizontal lines separate major headings. Charts have numbers that correspond with chapters and sections. The term **NOTE** or **EXCEPTION** identifies information which merits special attention.

The top of each page has a header. The bottom of each page has a footer. Information in the left of the header identifies the chapter; information on the right identifies the section. Information in the left of the footer indicates the manual transmittal (MT) number and date it was issued. For example, MT 1 - 1/00 on each page identifies the date of the revised manual. The Division of Aging Services will number updates sequentially. Information in the right of the footer indicates chapter, followed by consecutive page numbers within each chapter.

The complete name of an abbreviation or acronym is written in the first use in each section; thereafter in the section, the acronym or abbreviation is used.

EXCEPTION: Because of the frequent use of abbreviations and acronyms listed below, they are written only once per section:

AAA Area Agency on Aging

AIMS	Aging Information Management System
CCSP	Community Care Services Program
CHAT	Client Health Assessment Tool
DHR	Department of Human Resources
DMA	Division of Medical Assistance
DFCS	Division or Department of Family and Children Services
MAO	Medical Assistance Only
PMAO	Potential Medical Assistance Only
RN	Registered Nurse

Whenever the word client is used, it is meant to include the client's representative as well.